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FACSIMILE TRANSMISSION COVER SHEET

DATE: October 13, 2006

TO: Examiner Arun S. Phasge
 Group Art Unit 1753
 Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

RE: U.S. Patent Application No. 09/945,340
 For: CHROMATOGRAPHY AND OTHER ADSORPTIONS
 USING MODIFIED CARBON ADSORBENTS
Our Ref: 96074CIP2 (3600-011-03)

FROM: Luke A. Kilyk, Esq. 

FAC. TEL. NO.: 1-571-273-8300

NUMBER OF PAGES (INCLUDING THIS COVER SHEET): 14

Items Attached: Request for Reconsideration -- 11 pages
 Petition for 1-month Extension of Time -- 1 page
 Fee Transmittal -- 1 page

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. 1-571-273-8300 on October 13, 2006.

Kim Blum
 Name (Print)

Kim Blum
 Signature

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FEE TRANSMITTAL for FY 2006

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 120.00)

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Deposit Account

Deposit Account Number 03-0060

Deposit Account Name Cabot Corporation

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity				
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid		
1001 780	2001 395	Utility filing fee			
1002 350	2002 175	Design filing fee			
1003 550	2003 275	Plant filing fee			
1004 790	2004 395	Reissue filing fee			
1005 160	2005 80	Provisional filing fee			

SUBTOTAL (1) (\$ 0.00)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20**=	X	=
Independent Claims	-3***=	X	=
Multiple Dependent			=

Large Entity	Small Entity			
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid	
1202 50	2202 25	Claims in excess of 20		
1201 200	2201 100	Independent claims in excess of 3		
1203 360	2203 180	Multiple dependent claim, if not paid		
1204 200	2204 100	**Reissue independent claims over original patent		
1205 50	2205 25	**Reissue claims in excess of 20 and over original patent		

SUBTOTAL (2) (\$ 0.00)

** or number previously paid, if greater; For Reissues, see above

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 120.00)

Complete (if applicable)

Name (Print/Type)	Luke A. Kilyk	Registration No. (Attorney/Agent)	33,251	Telephone	1-540-428-1701
Signature				Date	October 13, 2006

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-8199 and select option 2.

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Name (Print)

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